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## \*BIBDATASHEET\*

CONFIRMATION NO. 6806

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/328,417	<b>FILING OR 371(c) DATE</b> 06/09/1999 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3629	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> MANUEL A. CORREA JR, OLNEY, MD;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/120,190 02/16/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/29/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 70
<b>INDEPENDENT CLAIMS</b> 8				
<b>ADDRESS</b> Manuel A. Correa, Jr. P.O BOX 4688 ROCKVILLE, MD20849				
<b>TITLE</b> POSTAL OUTGOING AND REPLY ENVELOPE FORM SYSTEM				
<b>FILING FEE RECEIVED</b> 1244	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	